

**STATE OF IDAHO - STARS**  
**WARRANT CANCELLATION**

AGENCY NAME	AGENCY CODE	CONTACT NAME	PHONE #	DATE

Please check the appropriate box and submit with the affidavits or warrants as indicated.

	<b>Normal Cancellation</b> (Attach Warrants & send to Statewide Accounting)
	<b>Lost Cancellation</b> (Attach Reissuance Affidavits & send to Statewide Accounting)
	<b>Payroll Cancellation</b> (Attach Warrants & send to Statewide Payroll)
	<b>Lost Payroll Cancellation</b> (Attach Reissuance Affidavits & send to Statewide Payroll)
	<b>Forgery Cancellation</b> (Attach Forgery Affidavit & send to Statewide Accounting)
	<b>EFT Cancellation</b> ( <i>For SCO use only</i> - Attach Treasurer Rejection Documentation)
	<b>Misc. Cancellation</b> (Attach Supporting Documents & send to Statewide Accounting)

Document Number	Warrant Number	Amount
<b>Total</b>		

Reason for Cancellation

**NOTE:** This process will not create a replacement warrant.

Date Cancelled		Cancelled by	